

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PA	75331	
O.I.P.E. CLASSIFIER		49	10/17/00
FORMALITY REVIEW	MAA	830	11-13-00
RESPONSE FORMALITY REVIEW	Wt	571	04/19/01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

BEST AVAILABLE COPY

Claim	Final	Original	Date
1	✓		
2	✓		
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50	✓		

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If more than 150 claims or 10 actions  
 staple additional sheet here

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